

1. CIR./DIST./DIV. CODE CAE		2. PERSON REPRESENTED Borrero, Edwardo		VOUCHER NUMBER			
3. MAG. DKT./DEF. NUMBER 5:04-002019-001		4. DIST. DKT./DEF. NUMBER		5. APPEALS DKT./DEF. NUMBER			
7. IN CASE/MATTER OF (Case Name) U.S. v. Borrero		8. PAYMENT CATEGORY Felony		9. TYPE PERSON REPRESENTED Adult Defendant			
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) If more than one offense, list (up to five) major offenses charged, according to severity of offense. 1) 18 USC F -- ASSAULT - FAMILY OF FEDERAL OFFICIAL							
12. ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix) AND MAILING ADDRESS TORRES, DAVID A. 1318 K STREET BAKERSFIELD CA 93301			13. COURT ORDER <input checked="" type="checkbox"/> O Appointing Counsel <input type="checkbox"/> F Subs For Federal Defender <input type="checkbox"/> P Subs For Panel Attorney C Co-Counsel R Subs For Retained Attorney Y Standby Counsel Prior Attorney's Name: _____ Appointment Date: _____ <input type="checkbox"/> Because the above-named person represented has testified under oath or has otherwise satisfied this court that he or she (1) is financially unable to employ counsel and (2) does not wish to waive counsel, and because the interests of justice so require, the attorney whose name appears in Item 12 is appointed to represent this person in this case, or <input type="checkbox"/> Other (See Instructions) Signature of Presiding Judicial Officer or By Order of the Court 02/11/2004 2/12/2004 2/11/2004 Date of Order Nunc Pro Tunc Date Repayment or partial repayment ordered from the person represented for this service at time of appointment. <input type="checkbox"/> YES <input type="checkbox"/> NO				
14. NAME AND MAILING ADDRESS OF LAW FIRM (only provide per instructions) <i>Meesa L. Tolson</i>							
CLAIM FOR SERVICES AND EXPENSES				FOR COURT USE ONLY			
CATEGORIES (Attach itemization of services with dates)			HOURS CLAIMED	TOTAL AMOUNT CLAIMED	MATH/TECH ADJUSTED HOURS	MATH/TECH ADJUSTED AMOUNT	ADDITIONAL REVIEW
In C o u r t	a. Arraignment and/or Plea		1				
	b. Bail and Detention Hearings						
	c. Motion Hearings						
	d. Trial						
	e. Sentencing Hearings						
	f. Revocation Hearings						
	g. Appeals Court						
	h. Other (Specify on additional sheets)						
(Rate per hour = \$ 90.00)	TOTALS:	90.00					
Out of Court	a. Interviews and Conferences						
	b. Obtaining and reviewing records						
	c. Legal research and brief writing						
	d. Travel time						
	e. Investigative and Other work (Specify on additional sheets)						
(Rate per hour = \$ 90.00)	TOTALS:	N/C					
17.	Travel Expenses (lodging, parking, meals, mileage, etc.)						
18.	Other Expenses (other than expert, transcripts, etc.)						
GRAND TOTALS (CLAIMED AND ADJUSTED):				90.00			
19. CERTIFICATION OF ATTORNEY/PAYEE FOR THE PERIOD OF SERVICE FROM 2-8-04 TO 2-11-04			20. APPOINTMENT TERMINATION DATE IF OTHER THAN CASE COMPLETION 2/12/2004		21. CASE DISPOSITION		
22. CLAIM STATUS <input type="checkbox"/> Final Payment <input type="checkbox"/> Interim Payment Number _____ <input type="checkbox"/> Supplemental Payment Have you previously applied to the court for compensation and/or reimbursement for this case? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If yes, were you paid? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Other than from the court, have you, or to your knowledge has anyone else, received payment (compensation or anything of value) from any other source in connection with this representation? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If yes, give details on additional sheets. I swear or affirm the truth or correctness of the above statement.							
Signature of Attorney: <i>Meesa L. Tolson</i> Date: 1/18/05							
APPROVED FOR PAYMENT - COURT USE ONLY							
23. IN COURT COMP. <i>\$90.00</i>	24. OUT OF COURT COMP.	25. TRAVEL EXPENSES	26. OTHER EXPENSES	27. TOTAL AMT. APPR. CERT	<i>\$90.00</i>		
28. SIGNATURE OF THE PRESIDING JUDICIAL OFFICER <i>Meesa L. Tolson</i>			DATE	<i>9/12/2005</i>	28a. JUDGE / MAG. JUDGE CODE 72BJ		
29. IN COURT COMP.	30. OUT OF COURT COMP.	31. TRAVEL EXPENSES	32. OTHER EXPENSES	33. TOTAL AMT. APPROVED			
34. SIGNATURE OF CHIEF JUDGE, COURT OF APPEALS (OR DELEGATE) Payment approved in excess of the statutory threshold amount.			DATE	34a. JUDGE CODE			

Case Name US v. Berger

Case Number 5-64-66

In-Court Hourly Worksheet

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